PTO/SB/06 (07-06)

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| PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875  |   |   |  |   |              |  |   | Application or Docket Number<br>10/559,715 |   |    | ing Date<br>05/2006   | To be Mailed           |  |
|--|---|---|--|---|--------------|--|---|--|---|----|-----------------------|------------------------|--|
| APPLICATION AS FILED – PART I (Column 1) (Column 2)  |   |   |  |   |              |  |   |  | OTHER THAN SMALL ENTITY OR SMALL ENTITY |    |                       |                        |  |
|  | FOR   | NU  | NUMBER FILED   |   | NUMBER EXTRA |  |   | RATE (\$)                                  | FEE (\$)                                |    | RATE (\$)             | FEE (\$)               |  |
|  | BASIC FEE<br>(37 CFR 1.16(a), (b),                              | or (c))                                   | N/A  |   | N/A          |  |   | N/A  |   | 1  | N/A                   |                        |  |
|  | SEARCH FEE<br>(37 CFR 1.16(k), (i),                             | or (m))                                   | N/A  |   | N/A          |  |   | N/A  |   | ]  | N/A                   |                        |  |
|  | EXAMINATION FE<br>(37 CFR 1.16(a), (p),                         | E<br>or (q))                              | N/A  |   | N/A          |  |   | N/A  |   |    | N/A                   |                        |  |
| TO<br>(37  | FAL CLAIMS<br>CFR 1.16(i))                                      |   | minus 20 =   |   | •            |  |   | x \$ =                                     |   | OR | x s =                 |                        |  |
|  | EPENDENT CLAIM<br>CFR 1.16(h))                                  | S   | minus 3 = *  |   |              |  |   | x \$ =                                     |   | 1  | x \$ =                |                        |  |
|  | APPLICATION SIZE<br>(37 CFR 1.16(s))                            | FEE sheer<br>is \$2:<br>additi            | If the specification and drawing<br>sheets of paper, the applicatio<br>is \$250 (\$125 for small entity)<br>additional 50 sheets or fraction<br>35 U.S.C. 41(a)(1)(G) and 37 |   |              | n size fee due<br>for each<br>i thereof. See |   |  |   |    |                       |                        |  |
| MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))  |   |   |  |   |              |  |   |  |   | ]  |                       |                        |  |
| * If   | the difference in col   | umn 1 is less than                        | r "0" in colu  |   | TOTAL        |  | ] | TOTAL                                      |   |    |                       |                        |  |
| APPLICATION AS AMENDED - PART II  OTHER THAN (Column 1) (Column 2) (Column 3) SMALL ENTITY OR SMALL ENTITY   |   |   |  |   |              |  |   |  |   |    |                       |                        |  |
| AMENDMENT  | 01/07/2011  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |  | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR |              | PRESENT<br>EXTRA                             |   | RATE (\$)                                  | ADDITIONAL<br>FEE (\$)                  |    | RATE (\$)             | ADDITIONAL<br>FEE (\$) |  |
|  | Total (37 CFR<br>1.16(i))                                       | • 32                                      | Minus  | <b>~</b> 33                                 |              | = 0  |   | x \$ =                                     |   | OR | X \$52=               | 0                      |  |
|  | Independent<br>(37 CFR 1,16(h))                                 | • 2                                       | Minus  | 4   |              | = 0  |   | x \$ =                                     |   | OR | X \$220=              | 0                      |  |
|  | Application Size Fee (37 CFR 1.16(s))                           |   |  |   |              |  |   |  |   |    |                       |                        |  |
| Ĺ  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j)) |   |  |   |              |  |   |  |   | OR |                       |                        |  |
|  |   |   |  |   |              |  |   | TOTAL<br>ADD'L<br>FEE                      |   | OR | TOTAL<br>ADD'L<br>FEE | 0                      |  |
| (Column 1) (Column 2) (Column 3)   |   |   |  |   |              |  |   |  |   |    |                       |                        |  |
| AMENDMENT  |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |  | HIGHI<br>NUME<br>PREVIO<br>PAID F           | BER          | PRESENT<br>EXTRA                             |   | RATE (\$)                                  | ADDITIONAL<br>FEE (\$)                  |    | RATE (\$)             | ADDITIONAL<br>FEE (\$) |  |
|  | Total (37 CFR<br>1,16(i))                                       |   | Minus  |   |              |  |   | x \$ =                                     |   | OR | x \$ =                |                        |  |
|  | Independent<br>(37 CFR 1,16(h))                                 |   | Minus  | ***   |              |  |   | x \$ =                                     |   | OR | x s =                 |                        |  |
| ᇳ  | Application Size Fee (37 CFR 1.16(s))                           |   |  |   |              |  |   |  |   | ]  |                       |                        |  |
| ΑM   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j)) |   |  |   |              |  |   |  |   | OR |                       |                        |  |
|  |   |   |  |   |              |  |   | TOTAL<br>ADD'L<br>FEE                      |   | OR | TOTAL<br>ADD'L<br>FEE |                        |  |
| If the entry in column 1 is less than the entry in column 2, write 0" in column 3.  If the "Highest Number Pervolusy Paid For NT HIS SPACE is less than 30, enter "20".  If the "Highest Number Pervolusy Paid For NT HIS SPACE is less than 3, enter "3".  If the "Highest Number Pervolusy Paid For NT HIS SPACE is less than 3, enter "3".  If the "Highest Number Pervolusy Paid For NT HIS SPACE is less than 3, enter "3".  If the "Highest Number Pervolusy Paid For NT HIS SPACE is less than 3, enter "3".  If the "Highest Number Pervolusy Paid For NT HIS SPACE is less than 3, enter "3".  If the "Highest Number Pervolusy Paid For NT HIS SPACE is less than 3, enter "3".  If the "Highest Number Pervolusy Paid For NT HIS SPACE is less than 3, enter "3".  If the "Highest Number Pervolusy Paid For NT HIS SPACE is less than 3, enter "3".  If the "Highest Number Pervolusy Paid For NT HIS SPACE is less than 3, enter "3".  If the "Highest Number Pervolusy Paid For NT HIS SPACE is less than 3, enter "3".  If the "Highest Number Pervolusy Paid For NT HIS SPACE is less than 3, enter "3".  If the "Highest Number Pervolusy Paid For NT HIS SPACE is less than 3, enter "3".  If the "Highest Number Pervolusy Paid For NT HIS SPACE is less than 3, enter "3".  If the "Highest Number Pervolusy Paid For NT HIS SPACE is less than 3, enter "3".  If the "Highest Number Pervolusy Paid For NT HIS SPACE is less than 3, enter "3".  If the "Highest Number Pervolusy Paid For NT HIS SPACE is less than 3, enter "3".  If the "Highest Number Pervolusy Paid For NT HIS SPACE is less than 3, enter "3".  If the "Highest Number Pervolusy Paid For NT HIS SPACE is less than 3, enter "3".  If the "Highest Number Pervolusy Paid For Num |   |   |  |   |              |  |   |  |   |    |                       |                        |  |

has collection of information is origined by 37 CFR 1,10. The information is required to obtain or retain a bound by the public which is in to file under by the USFTO to process) an application. Confidentiality is operand by 38 US 6.C 122 and 37 CFR 1.4. If this collection is estimated to the bit 2 minutes to complete excluding pathering, preparing, and submitting the completed application form to the USFTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this borton, although the formation Officer. U.S. Plants and Trichardan's Office. U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.